
Approved Entities

Waiver Number **833**

Primary Entity Name **Day One New York, Inc.**

Primary Address *PO Box 1507*
Canal Street Station
New York
NY
10013-

Primary Phone *(212) 566-8120*
Number

Current Waiver Issued Beginning Period
7/1/2015

Current Waiver Ending Period
6/30/2018

County *New York*

Professional Services to be Offered by Qualified Individuals:

<input checked="" type="checkbox"/> Licensed Master Social Work	<input checked="" type="checkbox"/> Licensed Marriage and Family Therapy	<input checked="" type="checkbox"/> Licensed Psychoanalysis
<input checked="" type="checkbox"/> Licensed Clinical Social Work	<input checked="" type="checkbox"/> Licensed Creative Arts Therapy	<input checked="" type="checkbox"/> Psychology
<input checked="" type="checkbox"/> Licensed Mental Health Counseling	<input type="checkbox"/> Licensed Behavior Analyst	<input type="checkbox"/> Certified Behavior Analyst Assistant

Additional Sites if any - with Certificate Number

Certificate Number

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